

Notary Signature

Date

My commission expires on _

Office of Financial Aid & Scholarships 1 University Parkway University Park, IL 60484 708.534.4480 govst.edu/financialaid

WITNESS my hand and official seal

(Seal)

CRI CODE: FAC25SEP

2025-2026 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information GSU will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at GSU. We may need to ask for additional information in the future. If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork to Governors State University. Incomplete paperwork will not be accepted, thereby delaying the processing of your financial aid award and only original copy will be accepted.

| original copy will b | e accepted. | , , | | g · y · · | , |
|--|---|--|--|---|--|
| | | | GSU ID # | | Last 4 digits of SS#: |
| (Please Print) | Last | First | | | |
| Permanent Home Ad | | | | | |
| | City | | | State | Zip Code |
| Student's Date of Bir | th: | Home Phone | e #: | | Cell #: |
| In addition, If you are not able to The original A copy of th Please note: | rnment-issued p you must sign the appear in person signed and nota e government-iss | hoto identification (ID), e Statement of Education, you must submit: rized Statement of Educ ued ID as referenced in s option, your notarized | onal Purpose p cational Purpo o the Notary's (| rovided below se provided be Certificate of A | elow. |
| Pri | nt Student's Name dent financial ass | istance I may receive w | e individual sig | gning this State | ement of Educational Purpose and nal purposes and to pay the cost of |
| Student Signature | | Date | | | |
| | | NOTARY'S CERTIFICA (Only complete this section | | | |
| State of | (| City/County of | | | On, |
| | | | | | Date |
| before me, | | , personal | ly appeared, | | nted name of signer, and |
| | | | | | nted name of signer |
| provided to me on l | basis of satisfacto | ry evidence of identific | ation | | nment-issued photo ID provided |
| | | | | Type of govern | |